



**CHARLES D. BAKER**  
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**Commonwealth of Massachusetts**  
**Division of Professional Licensure**  
**Office of Public Safety and Inspections**  
**Architectural Access Board**

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**JOHN C. CHAPMAN**  
UNDERSECRETARY OF  
CONSUMER AFFAIRS AND  
BUSINESS REGULATION

**CHARLES BORSTEL**  
COMMISSIONER, DIVISION OF  
PROFESSIONAL LICENSURE

**THOMAS HOPKINS**  
EXECUTIVE DIRECTOR

*Docket Number:* \_\_\_\_\_  
(Staff Use Only)

**GENERAL BUILDING COMPLAINT FORM**

**PLEASE BE ADVISED THAT THIS FORM IS A MATTER OF PUBLIC RECORD AND WILL  
BE DISCLOSED UPON REQUEST.**

1. What is the name and address of the building believed to be in violation of the Rules and Regulations of this Board?

Building Name or Description:

\_\_\_\_\_

Street Address:

\_\_\_\_\_

City/Town:

\_\_\_\_\_

2. Does it appear that the building was recently constructed or renovated? \_\_\_\_\_

3. What date were you most recently at the building? \_\_\_\_\_

4. How many floors? \_\_\_\_\_

- [illegible]

**NOTE:** Separate forms are available for complaints on Curb Cuts, Handicap Parking Spaces, Public Telephones, and Housing. Please call the office and request one or more forms.

### **OPTIONAL INFORMATION**

The following information is optional, and your complaint will be processed regardless of whether or not the information is provided. **However, you should be aware that the less information that is provided, the longer it will take this office to process your complaint.**

a. Name and address of the building owner or manager:

Name: \_\_\_\_\_

Mailing Address:

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b. The Board only considers complaints with respect to buildings which are:

1.) constructed by the state, city or town, and construction, reconstruction, alteration or remodeling occurred after December of 1968; or  
privately financed buildings that are open to or used by the public and construction, reconstruction, alteration or remodeling occurred after June 10, 1975.

c.

1.) Do you have reason to believe the element(s) subject to this complaint have been recently renovated?

Yes: \_\_\_\_\_ No: \_\_\_\_\_

If you answered yes, please indicate the date and extent of the work below, and if possible attach a copy of the associated building permit to this complaint.

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2.) Do you have reason to believe that in any continuous 3-year period the spending on construction, reconstruction, alteration, or remodeling was more than:

\$100,000 \_\_\_\_\_

30% of the building's assessed value \_\_\_\_\_

If you answered yes, please indicate the date and extent of the work below, and if possible attach a copy of the associated building permit to this complaint.

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Assessed value of the building only (do not include the value of the land):

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If possible, please attach a copy of the property card to your complaint.

7. Name and address of person/organization filing this complaint (if organization is filing, please provide the Board with the name of a contact person)(**required**):

Name: \_\_\_\_\_

Mailing Address:

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E-mail: \_\_\_\_\_

Telephone: \_\_\_\_\_

8. Individual Signature (**required**): \_\_\_\_\_

Date: \_\_\_\_\_